

12 Professional Concepts for Army Helping Professionals

1. Help Soldiers help themselves.
2. Fight to reduce psychological stigma.
3. Eliminate organizational barriers to care.
4. Caring for self facilitates caring for others.
5. Always do the best for everyone concerned.
6. Live and practice beyond reproach.
7. Operate at multiple levels within an organization.
8. Seek accomplishment, not acclaim.
9. Know the Army's doctrine and how to apply it.
10. Do what needs to be done.
11. Be prepared for all contingencies.
12. Display moral courage.

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This brochure contains a combination of research findings and recommendations, many of which are based on personal observations and experiences. The opinions and views expressed here are those of the Land Combat Team, and do not represent the policy or opinion of the U.S. Army or the Department of Defense. Updated 3 November 2005.

12 TOUGH FACTS FOR ARMY HELPING PROFESSIONALS



12 Facts and Concepts For Army Helping Professionals:

Fact #1: Many Soldiers enter the military with problems.

FINDINGS:

- 40% of Soldiers report abuse or neglect in their childhood home.¹
- 1 in 3 Soldiers will not complete their first enlistment.²

WHAT PROFESSIONALS CAN DO:

- Start where the Soldier is, not where you think he/she should be.
- Foster Soldier independence and self-capability.

Help Soldiers help themselves.

Fact #2: Soldiers are reluctant to admit they have a mental health problem.

FINDINGS:

- Soldiers believe that admitting to a mental health problem is a sign of weakness, others would treat them differently, & their leaders would view them differently.³
- Those who most need help perceive the most stigma.³

WHAT PROFESSIONALS CAN DO:

- Normalize and ease fear and shame.
- Teach leaders that seeking help takes courage.
- Identify and seek out the most vulnerable and at-risk.

Fight to reduce psychological stigma.

Fact #3: Helping professionals often build or maintain barriers to care.

FINDINGS:

- Common organizational barriers to mental health care access: difficulties getting an appointment, knowing where mental health care is located and obtaining transportation.⁴

WHAT PROFESSIONALS CAN DO:

- Let Soldiers know where you are located.
- Set “office hours” to fit Soldiers’ schedules.
- Accept walk-in appointments.
- Conduct routine, predictable and on-going outreach activities.

Eliminate organizational barriers to care.

Fact #4: Burnout and compassion fatigue are common.

FINDINGS:

- Burnout is a serious professional occupational “disease”⁵ and can lead to loss of empathy for Soldiers.
- 1/3 of OIF helping professionals report high/very high burnout.⁶

WHAT PROFESSIONALS CAN DO:

- Maintain personal and professional social support systems, utilize personal stress management skills, take R&R and set and maintain clear personal and professional boundaries.
- Accept your own limitations.

Care for yourself so you can care for others.

Fact #5: Helping professionals have two masters.

FINDINGS:

- Conflicting interests are at work: Soldiers may not seek help without assurance of confidentiality; Commanders are responsible for their Soldiers’ issues and problems.⁷

WHAT PROFESSIONALS CAN DO:

- State limits of confidentiality to all parties upfront.
- Seek professional consultation.
- Place safety first.

Always do the best for everyone concerned.

Fact #6: Deployments are professional fishbowls.

FINDINGS:

- Professional boundaries are hard to maintain during a deployment.
- Indiscretions or rumors are quickly disseminated.

WHAT PROFESSIONALS CAN DO:

- Maintain military and professional standards.
- When in doubt, don’t do it.

Live and practice beyond reproach.

Fact #7: Soldiers expect helping professionals to fix organizational problems.

FINDINGS:

- Some problems are organizational in nature (poor leadership, bad policy, etc.).⁸

WHAT PROFESSIONALS CAN DO:

- Helping professionals are responsible for the wellbeing of Soldiers and the unit as a whole; think systemically about problems and solutions.
- Provide Soldiers an anonymous “backdoor” to leaders.
- Present leaders with specific examples and suggestions.

Operate at multiple levels within an organization.

Fact #8: There is no such thing as “One” in the Army of One.

FINDINGS:

- Power and control issues take inordinate amounts of time and energy.
- Turf and professional battles hurt Soldiers and families.
- There is always enough misery to go around.

WHAT PROFESSIONALS CAN DO:

- Create and maintain professional networks.
- Take full responsibility for failures and give the team credit for all successes.

Seek accomplishment, not acclaim.

Fact #9: Mental health doctrine is frequently ignored.

FINDINGS:

- Mental health professionals often claim that the Army’s Combat and Operational Stress Control (COSC) doctrine isn’t relevant in OIF/OEF.^{4,9}

WHAT PROFESSIONALS CAN DO:

- Know and apply the Army’s COSC doctrine; also know when and why you deviate from it.
- Record and submit lessons learned when COSC doctrine needs to be changed, improved, or updated.

Know the Army’s doctrine and how to apply it.

Fact #10: Conducting behavioral health outreach is dangerous.

FINDINGS:

- Fear results in many providers not conducting outreach.
- Outreach improves Soldier access by removing barriers to care.⁶

WHAT PROFESSIONALS CAN DO:

- Go to where the Soldiers are.
- Overcome complacency and cowardice.
- Encourage and support each other in conducting outreach.

Do what needs to be done.

Fact #11: Leaders frequently overlook helping professionals except in times of crisis.

FINDINGS:

- During serious incidents, helping professionals will be called upon to restore unit and Soldier health and wellbeing.

WHAT PROFESSIONALS CAN DO:

- Be ready to execute during times of crisis. Have a plan.
- Use lessons learned to implement prevention activities.

Be prepared for all contingencies.

Fact #12: Helping professionals may need to deliver bad news.

FINDINGS:

- Helping professionals often learn of unpleasant things.
- No one likes to deliver bad news—particularly helping professionals who want everyone to feel good.
- Leaders are human and make mistakes, and sometimes need someone to confide in.
- Helping professionals having a special relationship with the Commander.

WHAT PROFESSIONALS CAN DO:

- Provide guidance to leaders during unpleasant times.
- Don’t delay or sugar coat bad news.

Display moral courage.